**Appendix 1**

**Survey questions – English version**

**QUESTION 1**

**Which statement best describes your current situation?**

1.     You manage to save a lot of money

2.     You manage to save a little money

3.     Your income is just sufficient to make ends meet

4.     You are cutting into your savings

5.     You are overdrawn due to one or more loans made to close friends or relatives

**QUESTION 2**

**Would you say that you currently feel comfortable or uncomfortable with your age?**

1.     Very comfortable

2.     Somewhat comfortable

3.     Somewhat uncomfortable

4.     Very uncomfortable

**QUESTION 3**

**To what extent do the following statements correspond to what you think?**

1.     Completely

2.     Somewhat

3.     Not really

4.     Not at all

1.     I feel confident about the future

2.     I feel physically and mentally fulfilled

3.     I still enjoy having fun as much as ever

4.     Sometimes I feel younger than my children's generation

5.     I take life as it comes and try not to think about tomorrow

6.     I don't have the impression I've changed much over the last 10 years

7.     I like novelty, learning new things

8.     I try to anticipate old age in spite of everything

QUESTION 4

**Have you started anticipating the changes you would need to make should you lose your autonomy?**

1.     Yes

2.     Somewhat

3.     Rather not

4.     Not at all

**QUESTION 5**

**Do you regularly find yourself in the following situations?**

1.     Completely

2.     Somewhat

3.     Not really

4.     Not at all

1.     Feeling love

2.     Feeling physically attracted to certain people

3.     Attracting others

4.     Going out dancing, to parties

5.     Feeling much younger than your age

6.     Wanting to start a new life

**QUESTION 6**

**Do you ever do the following things?**

1.     Frequently

2.     Quite often

3.     Sometimes

4.     Rarely

5.     Never

1.     Look after your grandchildren

2.     Provide academic tutoring

3.     Provide your children or other family members with financial support

4.     Participate in protests, sign petitions

5.     Have family members over for holidays

6.     Participate in the life of an association / community / support group

7.     Help a person in your family or social circle (neighbour, friend, etc.) who has significantly reduced autonomy

8.     Give your children or grandchildren advice (work, school, love life, etc.)

9.     Help people living outside your household to perform certain tasks (home repairs, cooking, cleaning, etc.)

10.  Accompany your grandchildren on school field trips

11.  Attend classes for manual activities (painting, drawing, home repairs, etc.)

12.  Organise, initiate family gatherings

13.  Keep up activities related to your former profession / your former activities

14.  Discover new things, keep up-to-date with innovations

**QUESTION 7**

**Overall, in your daily life, do you ever feel very lonely at certain times of day?**

1.     Every day or almost every day

2.     Most days

3.     At least every other day

4.     Only some days

5.     Never, or almost never

**QUESTION 8**

**If the answer to the previous question was 1 to 4**

**Do you suffer from these moments of solitude?**

1.     Yes, absolutely

2.     Yes, somewhat

3.     No, not really

4.     No, not at all

**QUESTION 9**

**When you are feeling down, can you count on the help or support of the following people?**

1.     Yes, a lot

2.     Yes, somewhat

3.     No, not really

4.     No, not at all

5.     Not applicable

1.     Your children

2.     Your grandchildren

3.     Your neighbours

4.     Your husband/wife

5.     Your friends

6.     Your home help (person in charge of housework and/or meals, shopping, etc.)

7.     Your parents

8.     The members of a local association that you belong to or are in contact with

**QUESTION 10**

**Would you say that life is currently a source of pleasure for you?**

1.     Yes, absolutely

2.     Yes, somewhat

3.     No, not really

4.     No, not at all

**QUESTION 11**

**If you had to define your current situation, would you say that…?**

1.     **You are in full possession of your faculties and can do everything by yourself:** move around, organise your daily life (meals, hygiene, housework, shopping, etc.)

2.     **You have some minor health concerns or minor problems and need a little help doing certain things:** moving around, organising your daily life (meals, hygiene, housework, shopping, etc.)

3.     **You have major health concerns or problems and need a lot of help doing certain things:** moving around, organising your daily life (meals, hygiene, housework, shopping, etc.)

**QUESTION 12**

**Overall, at this moment in time, do you feel...?**

1.     Yes, absolutely

2.     Yes, somewhat

3.     No, not really

4.     No, not at all

1.     Useful

2.     Satisfied with your life

**QUESTION 13**

**Should you become dependent and need a medical follow-up, what would you think of the following?**

1.     Desirable and realistic

2.     Not desirable but realistic

3.     Out of question

1.     Keep and adapt current accommodation

2.     Fine a new accommodation in a residence more suited to my needs

3.     Live in a nursing home

4.     Live with a friend that would take care of me

5.     Live in an apartment shared with other people

**QUESTION 14**

**Are you attached to your current accommodation?**

1.     Yes, absolutely

2.     Yes, somewhat

3.     No, not really

4.     No, not at all

**QUESTION 15**

**Would you feel ready to change accommodation if you found:**

1.     Yes, absolutely

2.     Yes, somewhat

3.     No, not really

4.     No, not at all

1.     A bigger accommodation that you like

2.     A smaller accommodation that you like

3.     A less expensive accommodation

4.     An individual apartment suited to your needs in a residence for older people

5.     An accommodation more suited to your current or future physical state

6.     An accommodation closer to where the people you enjoy being with live

7.     An accommodation closer to  healthcare facilities (hospitals, doctors)

8.     An accommodation in another region or country that you like

9.     An accommodation closer to amenities (shops, transportation …)

**QUESTION 16**

**How would you define the role of the following with regards to your attachment to your current accommodation?**

1.     Essential

2.     Considerable, without being essential

3.     Secondary

4.     Non-existent

1.     My neighbours

2.     The quality of my accommodation

3.     Shops nearby

4.     Entertainment, culture and recreational facilities nearby (museums, cinema, library …)

5.     Your habits

6.     The souvenirs that you have here

7.     The objects and furniture in your accommodation

8.     The city in which your accommodation is situated

9.     The proximity of family or friends

10.  The amenities nearby (transportation, hospitals, post office etc.)

11.  A feeling of safety

**QUESTION 17**

**Would you say that you enjoy the following?**

1.     Yes, absolutely

2.     Yes, somewhat

3.     No, not really

4.     No, not at all

1.     Organise a dinner at home with family or friends

2.     Cook nice meals for yourself

3.     Discover new recipes and products

4.     Go to the restaurant

5.     Teach younger people your recipes

6.     Define you own menu